



Michael R. Pence  
Governor

PENDLETON JUVENILE CORRECTIONAL FACILITY  
9310 South State Road 67 • Pendleton, Indiana 46064-8536  
Phone: (765) 778-3778 • Fax: (765) 778-5211

Bruce Lemmon  
Commissioner

## **Visitation Packet Overview**

**Form #1 – APPLICATION FOR VISITING PRIVILEGES** - This form is needed for all individuals wishing to visit who are ***over the age of 16***. Only parents, guardians, step-parents, siblings, aunts/uncles, grandparents and the incarcerated students own children are allowed to visit. Please note there is a separate form for visitors under the age of 16. Please feel free to make copies of this form as each visitor must be listed on a separate form. You must include a copy of a valid driver's license or state issued ID for each individual over the age of 16. Please note: Your ID cannot be faxed as it blacks out all information but can be emailed or photocopied and sent through the mail.

**Form #2 – VISITATION MINOR RESTRICTION EXEMPTION** - This form is **only needed** for any individuals wishing to visit who are ***under the age of 16***. A copy of the individual's birth certificate must also be submitted with the application.

**Form #3 – LIST OF APPROVED VISITORS** - This form is to be completed by the student's guardian. You should list all individuals that you approve to visit your child. Individuals listed will still be required to complete the visiting application process however; we must have the guardian's permission to allow individuals to visit.

**Form #4 – OFFENDER TELEPHONE LIST** - This form is to be completed by the student's guardian. You should list all individuals that you approve to speak with your child on the telephone. ***Please note:*** Students are only permitted to speak with the following family members while at our facility: Parents, guardians, step-parents, siblings, aunts/uncles and grandparents. **Allowing your child to speak with anyone else or allowing your child to speak with anyone through three-way calling will cause your child's phone privileges to be terminated for a minimum of 30 days.**

**VISITING REGULATIONS HANDOUT** – This handout outlines all of the information that you will need in regards to where our facility is located, visitation dates and times, what you are allowed to bring during visitation and the dress code for visitation. A ***VALID*** driver's license or state issued ID is required each time you enter the facility and is required for all visitors 16 years of age and older. ***Please pay special attention to the dress code as your visitation will be denied if you are not appropriately dressed.***

**The attached commissary forms are to show an example of the items that will be available to your son to purchase and the purchase price. These forms do not need to be returned.**



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Commissioner

**PLEASE NOTE:**

You may mail your visitation application and copy of your driver's license or state ID to the following address:

Pendleton Juvenile Correctional Facility  
9310 South State Road 67  
Pendleton, IN 46064  
Attn: L. Roberts

**OR**

**You may email your documents to the following email address:**

[laroberts@idoc.in.gov](mailto:laroberts@idoc.in.gov)

*(If you don't have a computer you can go to a local Office Max  
or Office Depot and they can email it all for you.)*

We are able to accept a picture of your driver's license or state ID taken by a cell phone as long as it is taken close enough that we can read the information but far enough away that we can see the entire card. (Please include inmate name and DOC # in the email if sent separately from your application)

If you have any questions, please feel free to contact me.

**L. Roberts**  
765-778-3778 Ext. 2124  
[laroberts@idoc.in.gov](mailto:laroberts@idoc.in.gov)



# APPLICATION FOR VISITING PRIVILEGES

State Form 14387 (R8 / 11-14)

DEPARTMENT OF CORRECTION

**INSTRUCTIONS:** 1. Please print. 2. All fields must be completed. 3. Sign the application. 4. Return this application to the offender's counselor as indicated at the bottom of this document. 5. Do not attempt to visit until the offender notifies you that your application was approved. 6. For persons age sixteen (16) and older, submit a legible copy of photo identification. 7. For children under age sixteen (16), submit a legible copy of their birth certificate. 8. Submit a separate application for each applicant, including children.

OFFENDER INFORMATION	
Name of offender	DOC number

The above named offender has requested that you be added to his/her list of approved visitors. In order for this to be done, you must follow the directions above and you (or parent / guardian) must properly complete this application and return it to the facility to the attention of the counselor of the offender's housing unit (do not return it to the offender). If you are approved to visit, it will be the offender's responsibility to notify you and then send you a copy of the rules for visitation. We do not give out this information by telephone.

APPLICANT INFORMATION					
Name of applicant (last, first, middle)			Date of birth (month, day, year)		Race
Current address (number and street, city, state, and ZIP code) - Must match identification used.					Telephone number ( )
Driver's license number	State of Issue	State identification number	State of Issue	Other approved identification number	Type
Are you related to the offender? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how? (Must be immediate family.*)				
* Immediate family is limited to mother, father, siblings, spouse, children, grandparents, grandchildren (including those with "step", "half", or adoptive relationships), and those persons with the same relationship to the offender's spouse. Up to a maximum of twelve (12) persons will be allowed on the offender's contact list.					
Applicant under eighteen (18) years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you on parole / probation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any pending charges against you? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been incarcerated in a penal facility in any state or any country? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, where? (Attach additional sheet, if necessary)		Why? (Attach additional sheet, if necessary)		
If you answered "Yes" to any of the questions in bold, you must submit a special written request for visitation privileges to the Superintendent of the appropriate facility. If you are on parole / probation, you must also submit written approval from your Parole / Probation Officer.					
Are you currently or formerly an employee of the Indiana Department of Correction or any correctional facility in any state? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, location		Last date of employment (month, day, year)		
Are you on any other offender's visiting list? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of offender		DOC number		Relationship
Are you now, or have you ever been, a volunteer at an Indiana correctional facility? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of facility		Type of volunteer		

**ANY FALSIFICATION OF INFORMATION ON THIS APPLICATION FOR VISITATION PRIVILEGES WILL RESULT IN IMMEDIATE SUSPENSION OF VISITATION PRIVILEGES AT ALL INDIANA DEPARTMENT OF CORRECTION FACILITIES.**

By signing below, you are indicating that:	
<ul style="list-style-type: none"><li>• You have read, understand, and agree to abide by all rules set forth by the Department of Correction in order to visit any offender at any Department facility.</li><li>• You understand that you, your property, and your vehicle, while on Department of Correction grounds, are subject to search, including frisk searches and the use of metal detectors, ion scanning equipment, and /or search dogs. You will be searched before being allowed to enter the visiting area. Refusal to submit to a search will result in you not being allowed to visit and you will be required to leave the facility immediately. Such refusal may restrict your ability to visit any offender in any Department of Correction facility.</li><li>• You understand that a criminal warrants check will be performed on you before you are allowed to visit.</li><li>• You understand that possession of any firearms, weapons, knives, ammunition, narcotics, controlled substances, alcoholic beverages, marijuana, tobacco or tobacco related items, or electronic devices, including cellular telephones, pagers, or other communication devices is strictly prohibited. Medication and money / currency may only be possessed in accordance with Department rules.</li><li>• You understand that visits are monitored and videotaped.</li><li>• You understand that placing an offender on any kind of pen-pal forum or social media will result in disciplinary action for the offender, even if the offender was unaware he/she was placed on any kind of pen-pal forum or social media.</li><li>• You certify that all of the information provided on this application is true, correct, and as up-to-date as possible to the best of your knowledge and that you will notify the facility of any changes of address, telephone number, etc.</li></ul>	
Signature of applicant	Date (month, day, year)
Signature of parent / legal guardian (if under eighteen (18))	Date (month, day, year)
<b>RETURN THIS FORM TO:</b>	
Name of facility	Attention: Counselor of _____ Housing Unit
Address of facility (number and street, city, state, and ZIP code)	

FOR OFFICE USE ONLY		
Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature of reviewing authority (please sign legibly)	Date (month, day, year)



**VISITATION MINOR RESTRICTION (VMR) EXEMPTION -  
FACILITY REVIEW CRITERIA FOR OFFENDER VISITATION WITH A MINOR**  
State Form 51812 (R2 / 9-13)  
DEPARTMENT OF CORRECTION

Name of offender	DOC number		
VMR offense	Name of facility		
Name of facility reviewer	Date of review (month, day, year)		
<b>REQUESTED VISITORS TO OFFENDER</b>			
<b>NAME</b>	<b>AGE</b>	<b>RELATIONSHIP</b>	<b>PATERNITY VERIFIED</b>
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>CRITERIA</b>			
A. Is the intended visitor outside the immediate family (children, siblings, grandchildren) or a documented victim?			<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Any record of multiple victims?			<input type="checkbox"/> Yes <input type="checkbox"/> No
C. Any record of visitation restrictions for sexually related activities in the last twelve (12) months?			<input type="checkbox"/> Yes <input type="checkbox"/> No
D. Any known court orders restricting contact with intended minor visitor(s)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
E. Did circumstances surrounding the VMR offense indicate that the minor was compelled by force or threat (including provided drugs or alcohol)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
F. Any victims (intended victims) under the age of eighteen (18), or so mentally disabled or deficient that consent cannot be given?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Note: If any "Yes" is indicated, the offender does not meet the criteria. Minor spouses are permitted visitation if they are not victims of the offender.</b>			
If the above criteria are met: Notify offender he/she may be eligible for visitation and will be referred for a Case Management Review. <u>Forward this form and copies of Victim Statements, Probable Cause Affidavit, PSI, and Sentencing Order to the SOMM Program Manager at the Central Office as your referral. Indicate below your contact information and the date of referral.</u> After completion of the Case Management Review, all information is to be reviewed and the final decision is at the discretion of the Facility Head.			
Name of contact person	Telephone number of contact person (       )		Date of review (month, day, year)



**LIST OF APPROVED VISITORS**  
State Form 40826 (r 2 / 8-88)

HOUSING LOCATION

*INSTRUCTIONS: The Staff will fill out this form listing all approved visitors for the offender. This form is to be completed when the offender arrives at the facility / institution. Changeable items (i.e., addresses), should be done in pencil.*

OFFENDER'S NUMBER / <b>PENDLETON JUVENILE CORRECTIONAL FACILITY</b>			OFFENDERS NAME		
NAME	AGE	ADDRESS (street/No.)	CITY AND STATE	TELEPHONE	APP/DATE
Father					
Mother					
Step-Father					
Step-Mother					
Spouse					
Ex-Spouse					
Son(s)					
Daughter(s)					
Brother(s)					
Sister(s)					
Grandmother(s)					
Grandfather(s)					

NAME	AGE	ADDRESS	CITY AND STATE	SEX	RELATION	TELEPHONE	APP/DATE
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
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23.							
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25.							
26.							
27.							
28.							
29.							
30.							



# OFFENDER TELEPHONE LIST

State Form 49014 (R / 10-99)

Name of Offender	DOC number	PIN number	Facility <b>PENDLETON JUVENILE CORRECTIONAL FACILITY</b>	
Housing unit				
I am requesting that the following names and telephone numbers be placed on my telephone list. I state that to the best of my knowledge the persons on this list are agreeable to receiving my calls and that telephone calls to those persons will be made for purposes permitted under Department of Correction policies and procedures and facility rules. I understand that I may submit no more than twenty (20) names without the approval of the Facility Head or designee.				
FIRST & LAST NAME	RELATIONSHIP	STREET ADDRESS	CITY, STATE, ZIP CODE	AREA CODE & NUMBER
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
I understand that I will be notified by staff if any of the telephone numbers listed are not placed on my telephone list.				
Signature of offender			Date (month, day, year)	

**PENDLETON JUVENILE CORRECTIONAL FACILITY**

9310 South State Road 67, Pendleton, Indiana 46064 (765) 778-3778

**VISITING REGULATIONS HANDOUT**

The Pendleton Juvenile Correctional Facility is located in Pendleton, Indiana on State Road 67 approximately twenty-five (25) miles north east of Indianapolis and approx. 6 miles south of Anderson driving directions located on Department of Correction internet site [www.in.gov/idoc](http://www.in.gov/idoc). The Pendleton Juvenile Correctional Facility encourages visiting and staff recognizes that through visitation, students are able to continue contacts with their family and friends that shall aid them while they are incarcerated and shall prove indispensable to them after they are released. Visitation with students committed to the Indiana Department of Correction is a privilege. Although the facility encourages visitation, security and the physical layout make it necessary to establish the following regulations:

1. All visitors must complete an Application for Visiting Privileges, be listed on the student's visiting list, (do not contact the facility to see if you are on a student's visiting list, this information shall not be given over the telephone) and must be subject to a criminal background check through IDACS. Falsifying or providing incorrect information on an application shall result in the applicant being banned from all correctional facilities for a period of one (1) year.
2. All visitors aged sixteen (16) and over shall be required to produce positive picture identification before entry into the visiting area. The only forms of identification accepted by the Department are:
  - a. A valid driver's license from the state of residence
  - b. A valid state photo identification card from the state of residence
  - c. A valid photo military identification card (active duty only)
  - d. A valid passport
  - e. A valid government identification card, including foreign governments

Exceptions to this requirement may be granted only by the Superintendent or designee. Visitors under the age of eighteen (18) must be accompanied by a parent or legal guardian at all times while on the facility grounds. This procedure does not apply to a student's spouse who is under the age of eighteen (18) years. Based upon a request from the student, the Superintendent may grant an exception to this requirement. In cases where a parent or guardian cannot accompany a minor child, the Superintendent may approve another responsible adult to accompany the child during a visit. The minor child's parent or legal guardian must sign and have notarized State Form #48965, "Authorization for Minor Child to Visit", prior to actual visit.

3. Ex-offenders are not permitted to visit unless approved by the Superintendent. Such visits shall be limited to immediate family members only. To obtain approval, the ex-offender must write the Superintendent requesting to visit and list the person(s) they wish to visit. Persons on parole or probation must include a written recommendation from their Probation or Parole Officer to the Superintendent. Ex-employees of the Department of Correction and current Department of Correction employees must have written approval from the Facility Head and the Commissioner before they may visit a student.
4. Students shall be permitted to receive visits during the designated visiting days and times. Students shall be permitted to receive unlimited number of visits during each week. Our goal is to facilitate increased family participation and interaction with the students.
- 5.

Monday Evening:	6:30 P.M. to 8:00 P.M.	Saturday Morning:	8:30 A.M. to 11:00 A.M.
Tuesday Evening:	6:30 P.M. to 8:00 P.M.	Saturday Afternoon:	1:00 P.M. to 3:15 P.M.
Wednesday Evening:	6:30 P.M. to 8:00 P.M.	Saturday Evening:	6:30 P.M. to 8:00 P.M.
Thursday Evening:	6:30 P.M. to 8:00 P.M.	Sunday Morning:	8:30 A.M. to 11:00 A.M.
Friday Evening:	6:30 P.M. to 8:00 P.M.	Sunday Afternoon:	1:00 P.M. to 3:15 P.M.
		Sunday Evening:	6:30 P.M. to 8:00 P.M.

**EXTRA VISITATION DAYS AND TIMES ARE:****THE LAST TUESDAY OF EACH MONTH:**

January 27, 2015	February 24, 2015	March 31, 2015
April 28, 2015	May 26, 2015	June 30, 2015
July 28, 2015	August 25, 2015	September 29, 2015
October 27, 2015	November 24, 2015	December 29, 2015

**HOLIDAYS: VISITATION TIME IS 8:30 A.M. TO 11:00 A.M. or 1:00 P.M. to 3:15 P.M.**

New Year's Day	Thursday	January 1, 2015
Martin Luther King, Jr. Day	Monday	January 19, 2015
Good Friday	Friday	April 3, 2015
Primary Election Day	Tuesday	May 5, 2015
Memorial Day	Monday	May 25, 2015
Independence Day	Friday	July 3, 2015
Labor Day	Monday	September 7, 2015
Columbus Day	Monday	October 12, 2015
General Election Day	Tuesday	November 3, 2015
Veterans Day	Wednesday	November 11, 2015
Thanksgiving Day	Thursday	November 26, 2015
Lincoln's Birthday	Friday	November 27, 2015
Washington's Birthday	Thursday	December 24, 2015
Christmas Day	Friday	December 25, 2015



6. The maximum number of individuals allowed to visit at one session is four (4). Children under the age of one (1) year shall not be counted as one of the four approved visitors and only two (2) children under the age of twelve months shall be permitted per visit.
6. Visits may be terminated prior to the designated times to accommodate more visitors, should the situation arise. Special visits shall be granted on a case by case basis with prior approval from the Superintendent or designee. Special visits may include; visits on other than designated visiting days and visitors approved for one visit only.
7. All persons coming to the facility are expected to conduct themselves in a polite and orderly manner. Persons who are intoxicated or appear to be under the influence of drugs/alcohol shall not be permitted to visit. Visitors that are seriously impaired through drugs or alcohol shall be reported to the Indiana State Police immediately to ensure they do not operate a motor vehicle. All visitors shall be required to submit to a search of their person and property. Frisk searches of a visitor's person shall be conducted by staff of the same gender as the visitor. Additionally, visitors shall be subject to additional searches using metal detectors and ION Scanning equipment. Visitors in the waiting area or visiting room may be searched by trained K-9's at any time while in the facility. Any visitor who refuses to be searched shall be advised that they shall not be permitted to enter the facility visiting area. Visitors are to ensure they lock their vehicles while on State property.
8. All visitors shall be asked, , "Do you have in your possession any firearms, weapons, knives, ammunition, cell phones, narcotics, tobacco, or controlled substances including alcohol or marijuana? Are you presently under the influence of an alcoholic beverage, narcotic, or controlled substance?"

During the influenza season (October thru March), staff shall question the visitor about influenza-like illness prior to entering the facility to visit. All visitors must be asked specifically if they have had, within the previous seven (7) days, any of the following symptoms:

- a. Fever
- b. Cough
- c. Body aches
- d. Runny nose
- e. Sore Throat

Visitors with current symptoms observed during questioning or those who acknowledge having had any of the symptoms listed above in the previous seven (7) calendar days prior shall not be permitted to enter the facility. Alcohol-based hand sanitizer should be available in all visitor entries and all visitors should be encouraged to use this product before entering the facility."

9. In addition, visitors shall be asked if they have any disabilities that shall require special accommodations. Accommodations may include allowing the visitor to enter the facility with a service dog (seeing eye dog, etc.).
10. Visitors may only take a \$20.00 in change per visiting adult. Change must be carried in small clear Ziploc type baggie. Other permissible items are a Driver's License, one (1) key to vehicle, wedding/engagement rings, handkerchief/kleenex, medical I.D. bracelet/necklace, and infant care items (one [1] receiving blanket, one [1] clear bottle, one (1) diaper, and one [1] pacifier). All other items shall be placed in the visitor's locker. Nitro pills (small amount), oxygen tanks, canes, wheelchairs, crutches may be taken into the visiting room upon inspection by the Shakedown Officer. No pierced earrings, no other body jewelry of any kind.
11. Visitors shall not be permitted to re-enter the visiting area once they leave.
12. Visits shall not be split between visitors. Once a visit starts, no one else shall be permitted to enter the visit. Visitors shall only visit the designated student. No visiting between other students.
13. Lockers shall be provided for the visitor's personal effects. PLEASE BEAR IN MIND THAT SUBSTANTIAL SUMS OF MONEY OR OTHER VALUABLES SHOULD NOT BE BROUGHT TO THE FACILITY. THE STATE OF INDIANA, DEPARTMENT OF CORRECTION, AND THE PENDLETON JUVENILE CORRECTIONAL FACILITY ASSUMES NO RESPONSIBILITY OR LIABILITY FOR ANY ARTICLES PLACED IN LOCKERS IN THE FACILITY OR SECURED IN AUTOMOBILES IN THE PARKING LOT. VISITORS ENTER THE VISITING AREA AT THEIR OWN RISK. THE DEPARTMENT OF CORRECTION SHALL NOT ASSUME ANY LIABILITY FOR ANY INJURIES OR DAMAGE OR LOSS OF PROPERTY AS A RESULT OF A PERSON ENTERING A VISITING AREA OR ANY OTHER AREA WITHIN THE FACILITY. NO PERSONAL EFFECTS SHALL BE HELD/SECURED FOR VISITORS AT THE MAIN CONTROL AREA. CELL PHONES MUST BE SECURED IN VISITOR'S VEHICLE. NO CELL PHONES ARE ALLOWED TO BE STORED IN THE WAITING ROOM LOCKERS.
14. INDIANA STATUTES: A person who, without the prior authorization of a the person in charge of a penal facility, knowingly or intentionally: (1) delivers, or carries into the penal facility with intent to deliver, an article to an offender of the facility, or (2) carries or receives with intent to carry out of the penal facility, an article(s) from an offender of the facility, commits trafficking with an offender, a Class A Misdemeanor. However, the offense is a Class C Felony if the article is a controlled substance or a deadly weapon (IC 35-44-3-9).
15. IC 35-44-3-9 states:
  - a. Except as provided in subsection (d), a person who, without the prior authorization of the person in charge of a penal facility or juvenile facility knowingly or intentionally: delivers, or carries into the penal facility or juvenile facility with intent to deliver, an article to an inmate or child of the facility;
    - 1) carries, or receives with intent to carry out of the penal facility or juvenile facility, an article from an inmate or child of the facility; or
    - 2) delivery, or carries to a work site with intent to deliver, alcoholic beverages to an inmate or child of a jail work crew or community work crew; commits trafficking with an inmate, a Class A misdemeanor,
  - b. If the person who committed the offense under subsection (b) is an employee of:
    - 1) the department of correction; or

- 2) a penal facility; and the article is a cigarette or tobacco product (as defined in IC 6-7-2-5), the court shall impose a mandatory five thousand dollar (\$5,000) fine under IC 25-50-3-2, in addition to any term of imprisonment imposed under IC 35-50-3-2,
- c. The offense under subsection (b) is a Class C felony if the article is:
  - 1) a controlled substance; or
  - 2) a deadly weapon.

A person who commits a Class A misdemeanor shall be imprisoned for a fixed term of not more than one (1) year, in addition, he/she may be fined not more than five thousand dollars (\$5,000), (IC 35-50-3-2). A person who commits a Class C felony shall be imprisoned for a fixed term of four (4) years, with not more than four (4) years added for aggravating circumstances or not more than two (2) years subtracted for mitigating circumstances. In addition, he/she may be fined not more than ten thousand dollars (10,000). (IC 35-50-2-6).

It is a Class C infraction for a person to furnish an alcoholic beverage to a person confined in a penal facility. It is unlawful, also, for a person who has charge of a penal facility to knowingly permit a prisoner confined within his/her jurisdiction to receive an alcoholic beverage unless it has been prescribed by a physician as medicine for the prisoner (IC 7-1-5-10-16) or unless it is distributed as sacramental wine for a religious purpose by a minister, priest, or rabbi, (IC7-1-1-2-3) (a) (3).

A person who commits a Class C infraction may be fined not more than five hundred dollars (\$500) (IC34-28-5-4) (c).

16. All visitors must be appropriately attired when visiting. Listed below is the dress code for visiting.

- a. Visitors may wear shorts; however, the shorts may not be more than two (2) inches above the knee.
- b. Visitors are not permitted to wear halter tops, tube tops, swimsuit or bodysuit as a top or low-cut revealing tops. All visitors must wear a shirt/blouse with sleeves.
- c. Undergarments (bra/underwear) must be worn.
- d. Dress or skirt hemlines are not permitted if more than two (2) inches above the knees. Revealing slits or kick pleats exposing more than two (2) inches above the knees shall be pinned.
- e. Sheer blouses are permitted if worn with a camisole.
- f. Head attire is permitted to be worn only if it is required as part of a religious practice or medical condition. This item shall be subject to being searched.
- g. Shoes must be worn; this includes children, with the exception of infants in arms. NO open toed sandals of any kind.
- h. Outer coats and coat sweaters shall not be permitted in the visiting area. Sport coats, blazers, jogging jackets (if they are a part of a matching outfit) shall be permitted. Light sweaters are permitted. No hooded sweatshirts.
- i. Spandex pants/shorts, leggings, stirrup pants are not permitted in the Visiting Room.
- j. The Superintendent or designee may cancel a visit if the visitor's attire is considered inappropriate.

17. Students and visitors are not permitted to wander from one visiting area or table to another.
18. Vending machines are provided in the Visiting Room for your convenience. No beverages, cups, or other vending machine items may be taken into or out of the Visiting Room. Students are not permitted to go to or use the vending machines.
19. Kissing and embracing between visitors is permitted at the beginning and end of the visit. There shall be no kissing or embracing during the actual visit. Students may hold hands with their visitor during the visit; however, students shall not touch any other part of the visitor's body.
20. Visitors are responsible for the behavior and control of minor children. If minor children are a major disruption, visitors may be requested to leave the facility and the visit shall be terminated.
21. If a visitor or student is found to be trafficking, the evidence shall be turned over to the Indiana State Police with a recommendation that the matter be prosecuted to the fullest extent. In addition, any visitor caught trafficking shall be permanently banned from visiting any offender in the Department of Correction and any Department facility.
22. **THE PENDLETON JUVENILE CORRECTIONAL FACILITY IS A TOBACCO FREE FACILITY. TOBACCO PRODUCTS AND PARAPHENALIA ARE NOT AUTHORIZED.**
23. Any student found to be engaging in trafficking or using or in possession of a controlled substance shall have his visiting privileges restricted to "non-contact" visits only. The first offense, the "non-contact" visits shall be for a period of six (6) months; second offense – twelve (12) months; third and subsequent offenses following two (2) previously imposed non-contact – Permanent non-contact visiting.
24. Public Transportation is available at some facilities; however, there may be a cost for the use of this transportation and the Department of Correction does not endorse or claim any liability for the use of the transportation provider.



**Michael R. Pence**  
Governor

**PENDLETON JUVENILE CORRECTIONAL FACILITY**  
9310 South State Road 67 • Pendleton, Indiana 46064-8536  
Phone: (765) 778-3778 • Fax: (765) 778-5211

**Bruce Lemmon**  
Commissioner

## Student Phone System

Use of the offender phone is a privilege and can be suspended/terminated for abuse or misuse of the system.

### **Helpful reminder about the phone policy**

Phone calls are recorded and monitored.

Students can only make phone calls to authorized people. A phone list is used in order to get a phone number added to a student's account. The student's legal guardian must fill out the initial phone list for the student. It should be filled out with the people that the legal guardian wishes the student to have contact with – **immediate family only.**

Students are only allowed to talk to their approved immediate family – parents, grandparents, siblings, aunts, and uncles. No cousins. Step family members are allowed.

Students are not allowed to talk to their friends or their girlfriends (or child's mother). The phones are designed for treatment. Friends and girlfriends are not considered part of treatment.

2 way calls are prohibited, no matter who the call is to. Speaker phone is prohibited.

When passing the phone to other people, in the same house, they must all still be immediate family members. It is not acceptable to have unauthorized people talking on an approved phone number.

Phones can be shut off due to nature or content. Remember phone calls are monitored and will be listened to. Conversations about illegal activity, drugs/alcohol, or anything not appropriate for the student can result in a suspension.

Students are not allowed to pass the phone to other students in their units to allow them to talk on their phones.

If a student's phone is suspended they will be notified in writing about the suspension.



## **Send Money**

### **Send the funds your inmate needs**

When you send money with JPay, you can rest assured that your inmate will have the funds they need to get by inside. Transfers are quick and completely secure, and can be made from the convenience of your home computer, phone, or any MoneyGram agent location nationwide.

#### **Your funds, faster**

Funds sent through JPay.com are generally available the next day\*. The online system accepts credit cards for money transfer transactions, making JPay the quickest and most convenient way to get funds to your incarcerated loved one. Setting up an account is free, and the rates for sending money are competitive.

#### **The easy way to send money**

JPay makes sure that the money transfer process is as seamless as possible, both for you and for your inmate. Whether you are funding a commissary or 'spendable' inmate trust account or a dedicated purpose account, your inmate will be able to access that money in a matter of hours. Recurring payments are available, and you can send money to multiple inmates.

JPay also provides a quick and easy way to send money using a money order. For many facilities and agencies, you can send a money order directly to the JPay Money Order Lockbox, where it will be processed electronically.

\*Please note, payment availability varies according to each agency and depositor verification.

# CONNECTED EASIER

## Video

*The next best thing to being there!*

- Talk face-to-face in real time
- 30-minute sessions available
- Affordable and easy to schedule
- Send 30-second VideoGrams from your smartphone or computer



## Email

*Use your computer or smartphone to stay connected!*

- Read & write email anywhere with JPay Mobile
- Attach photos to any email
- Faster and more convenient than traditional mail



## Money Transfer

*Send money the easy way, with funds received the next day!*

- Online at JPay.com
- JPay Mobile for iPhone and Android
- Toll-free 800-574-5729
- Use cash at MoneyGram locations (receive code 6142)



www.JPay.com  
800-574-5729



Stay connected.

# YOU NEED JPAY

**JPay is the fastest, easiest way for your friends and family to send you money – with next-day funding.**

**Tell your friends and family about these convenient options:**



Visit **JPay.com** to send money with a credit or debit card online



Download the JPay Mobile App for Android & iPhone to send money anytime, anywhere



Call 1-800-574-5729 to speak with a JPay representative 24/7



Visit any **MoneyGram** location, like **CVS/pharmacy** or **Walmart**, to send money with cash in person. Use receive code 6142



Use the JPay lobby kiosk in your facility to deposit cash or use a credit/debit card to fund your account

**Tell your loved ones about JPay today!  
Get your money tomorrow.**



Stay connected.



## Frequently Asked Questions

**Q: HOW CAN I SET UP AND MAKE A DEPOSIT TO AN ADVANCEPAY ACCOUNT?**

A: There are several options available to you. One of the easiest ways is by using [www.connectnetwork.com](http://www.connectnetwork.com). Another convenient way is by calling our automated system at 1-800-483-8314. Deposits can be made 24 hours a day, 7 days a week.

Deposits can also be made by visiting your local Western Union. Additionally, deposits may be made by check or money order made payable to GTL AdvancePay and mailed to:

AdvancePay Service Dept.  
PO Box 911722  
Denver, CO 80291-1722

**Q: CAN I USE A CREDIT OR DEBIT CARD TO MAKE A DEPOSIT?**

A: Yes, GTL accepts Visa®, MasterCard® and Discover® credit and debit cards.

**Q: HOW LONG WILL IT TAKE FOR DEPOSITS TO APPEAR IN AN ACCOUNT?**

A: Almost immediately when the deposit is made online or through our automated telephone system.

**Q: WHAT IF I DON'T HAVE A CREDIT OR DEBIT CARD?**

A: Deposits can be sent via USPS or through Western Union, or you can purchase a prepaid debit card at many local retailers that can be used with GTL's automated systems. Prepaid cards with a Visa, MasterCard or Discover card logo are normally compatible.

**Q: HOW CAN I FIND OUT THE BALANCE OF MY PREPAID ACCOUNT?**

A: By calling our automated system at 1-800-483-8314 or registering online through ConnectNetwork at [www.connectnetwork.com](http://www.connectnetwork.com).

**Q: ARE ADVANCEPAY CALL RATES MORE EXPENSIVE?**

A: Generally AdvancePay rates are equal to — or less than — conventional collect calls, but all rates are ultimately governed by the facility contract.

**Q: WILL I RECEIVE A MONTHLY STATEMENT?**

A: No. Most account holders prefer not to. If needed, call and deposit histories are available from our customer service representatives who can be reached at 1-866-230-7761.

**Q: WILL I RECEIVE A REFUND FOR THE UNUSED FUNDS WHEN AN OFFENDER IS RELEASED?**

A: Refunds to verified account holders can be arranged through our customer service representatives. Call 1-866-230-7761 for more information. Dormant accounts are subject to closure and forfeiture of unused funds after 90 days of inactivity.

**Q: AFTER ESTABLISHING AN ADVANCEPAY ACCOUNT, CAN I SWITCH BACK TO OTHER FORMS OF BILLING?**

A: No. Once a telephone number is set up as an AdvancePay account, no other forms of billing are available.

**Q: CAN I MANAGE MY ACCOUNTS ONLINE?**

A: Yes. You can register online through ConnectNetwork at [www.connectnetwork.com](http://www.connectnetwork.com).

**Q: CAN I MAKE A DEPOSIT TO A COMMISSARY OR TRUST ACCOUNT ONLINE?**

A: Yes. This service is available at select facilities. Please visit ConnectNetwork at [www.connectnetwork.com](http://www.connectnetwork.com) and select the "Locations" tab to determine availability at your facility.

**Q: WHAT IF MY NUMBER IS BLOCKED FROM RECEIVING OFFENDER PHONE CALLS?**

A: For questions about blocked numbers or billing problems, please call GTL Customer Service at 1-866-230-7761.



# AdvancePay®

**GTL INMATE FAMILY PREPAY**

The Fastest, Most Secure Way  
Prepay Inmate Call, Commis.  
and Trust Accounts

**ADVANCEPAY CUSTOMERS CAN NOW USE**  
[www.connectnetwork.com](http://www.connectnetwork.com)







## GTL INMATE FAMILY PREPAY

### A Service for Family and Friends

Family members and friends of offenders are given the option to set up prepaid calling accounts using credit cards, checks, money orders or Western Union. Calls that may otherwise be blocked are now completed through GTL's AdvancePay program.

### How Does It Work?

AdvancePay is a prepaid collect calling service that allows calls from an offender in a correctional facility to your telephone number without the restrictions of standard billing. When an offender attempts to dial an unbillable number, they are placed on hold and AdvancePay will provide the option to the called party to set up a prepaid account. After a prepaid account is established, collect calls to the telephone number may be placed up to the prepaid amount in the account. After funds are depleted, the system will prompt the account holder to add funds.

For more complete account management, you can make deposits and view your balance at [connectnetwork.com](http://connectnetwork.com).

### Benefits: Security, Speed, Simplicity

AdvancePay account holders can rest assured that they alone manage their accounts, ensuring that their important calls will be received. Our automated systems contact account holders when additional funds need to be added. To facilitate future deposit transactions, credit card numbers can be securely stored. An option to automatically fund an account with a stored credit card when funds are

### Questions?

The AdvancePay Service Department is ready to answer all billing related questions:

#### CUSTOMER SERVICE

1-866-230-7761

#### FAX NUMBER

1-251-473-2802

#### HOURS OF OPERATION

Monday to Friday  
7am to 11pm, Central

Saturday and Sunday  
8am to 7pm, Central

The easiest way to establish and manage an AdvancePay account is online at [www.connectnetwork.com](http://www.connectnetwork.com). You can create a telephone account, make deposits and view balances through ConnectNetwork at [connectnetwork.com](http://connectnetwork.com).

Customers can also use GTL's automated phone system to create an account and make deposits with a credit card. The system is completely automated and can be accessed by calling 1-800-483-8314.

Additionally, accounts can be created and deposits can be made through our AdvancePay customer service department (1-866-230-7761), by visiting a Western Union location, and by mailing checks or money orders made payable to GTL AdvancePay to the address above.

Transaction fees may apply to deposits.

#### MAILING ADDRESS







AdvancePay Service Dept.  
PO Box 911722  
Denver, CO 80291-1722

#### WEBSITE

[www.connectnetwork.com](http://www.connectnetwork.com)

## How to avoid disconnection

### IMPORTANT NOTES ABOUT CALLS FROM CORRECTIONAL FACILITIES

-  DON'T attempt a 3-way call
-  DON'T try to transfer the call
-  DON'T put the offender on hold
-  DON'T use or answer "call waiting"
-  DON'T press numbers on the touch tone during the call (on both offender phone called party phones)
-  DON'T stop the conversation for any length of time because even short pauses may cause disconnection

### BLOCKED NUMBERS

Once a number has been blocked, only the person whose number is listed to may unblock the number by calling 1-866-230-7761

### NOTICE

AdvancePay payments may be subject to taxes and fees and are subject to change without notice. This publication may be distributed to inmates, family members, and friends.



WWW

AdvancePay Service Dept.  
PO Box 911722  
Denver, CO 80291-1722  
1-800-483-8314



# Jpay.com Money Order Deposit Form

## Instructions

Notice: All money orders must be issued in US Funds.  
To avoid delay of funding visit [www.JPay.com](http://www.JPay.com) and make a money transfer online.

- Type or write in black or blue ink only.
- Write clearly to avoid delays in processing your transaction.
- Verify that the Inmate name and ID are entered correctly on the money order deposit slip.
- Do not include any letters or notes with your payment because these will be discarded.
- Detach the deposit slip, the lower portion, at the dotted line and mail with your money order.
- PLEASE MAKE SURE MONEY ORDER IS PAYABLE TO "JPAY".
- Mail deposit slip and money order to JPay, P.O. Box 531399, Miami Shores, FL 33153.
- For additional information call 1 (866) 333-5729.
- Money Orders may not exceed \$999.99 in value.
- Money Orders will ONLY be processed if the customer is on the Approved Sender List
- A small fee of \$1.95 will be deducted from each money order that is processed.

Notice: If it cannot be determined who a money order belongs to, JPay will hold the funds until they can be verified. For full Terms and Conditions of held funds please visit [www.JPay.com](http://www.JPay.com) for full disclosure.

**Put down your pen!**  
**Put away your car keys!**

There's a faster way  
to send money,  
go to [JPay.com](http://JPay.com) and  
sign up now!

**Jpay.com**

Stay Connected.

Money order deposit slip **MUST BE INCLUDED** with  
money order to process funds and avoid delay.

Type your information into the form below, then print and send in with your money order

## Jpay.com Money Order Deposit Slip

Mail to: JPay, P.O. Box 531399, Miami Shores, FL 33153

Amount of Money (do not exceed \$999.99)

\$ | | | | |

Inmate's ID

Inmate's State

| | | | | | | | I | N |

Inmate's Full Name

| | | | | | | | | | | | | | | | | |

Sender's First Name

| | | | | | | | | | | | | | | | | |

Sender's Last Name

| | | | | | | | | | | | | | | | | |

Sender's Address

\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Sender's phone number

( | | | ) | | | | | | | | | |



# Video Visitation

## The Next Best Thing to Being There

When physical visitation by friends and family is inconvenient or difficult  
***JPay is the answer...***

All that's needed is a webcam and approval from the facility "approved visitor list"

### Friends & Family

- I. Go to [www.JPay.com](http://www.JPay.com) to schedule a visit by clicking on the schedule a visit tab
  - I. *"Agree to T&C"*
- II. Select the date requested "4 day lead-time is required"
  - I. *All visit requests are checked against approved visitors list*
  - II. *Provides facility staff opportunity to review submissions & reject if needed*
  - III. *Any date unavailable due to black-out period or previous booking will show*
- III. Confirm payment method will need to be completed
  - I. Friends & Family have the ability to test web-cam
    - I. *Camera and headsets are needed to conduct this (ensures proper audio/video function)*



# Video Visitation



The Next Best Thing to Being There  
**Continued...**



**Again:** Friends and Family must agree to JPay Terms and Conditions prior to scheduling Video Visitation

- They'll be prompted to select specific a date and time
- Select the date requested "4 day lead-time is required"

**Jpay.com** making it easier Inmate Search

Home Send Money Email Music

Video Visits **Schedule Visits** Step 1 Step 2 Step 3

Schedule Visit All times are converted to the facility timezone: Eastern Standard Time

Test Webcam

History

Video How To

**Choose Date**

Sun	Mon	Tue	Wed	Thur	Fri	Sat
24	25	26	27	28	29	30
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	1	2	3	4

March 2013

Back Cancel Continue

**Jpay.com** making it easier Inmate Search

Home Send Money Email Music

Video Visits **Schedule Visits** Step 1 Step 2 Step 3

Schedule Visit All times are converted to the facility timezone: Eastern Standard Time

Test Webcam

History

Video How To

**Choose Time**

6:00-6:30am

6:30-7:00pm

7:00-7:30pm

7:30-8:00pm

8:00-8:30pm

8:30-9:00pm

9:00-9:30pm

9:30-10:00pm

10:00-10:30am

10:30-11:00pm

11:00-11:30pm

11:30pm-12:00am

Back Continue

**Parole & Probation**

- Restoration
- Supervision Fees
- Court Fees
- Self-Report Fees
- Release Cards

**Social**

- Jpay.com
- Family & Friends
- Feedback
- Twitter

**JPay.com**

- Home
- Send Money
- Inmate Search
- Prison Search
- Contact Us
- Help

**Legal/Agreements** | Consumer/Privacy



**Michael R. Pence**  
Governor

**PENDLETON JUVENILE CORRECTIONAL FACILITY**  
9310 South State Road 67 • Pendleton, Indiana 46064-8536  
Phone: (765) 778-3778 • Fax: (765) 778-5211

**Bruce Lemmon**  
Commissioner

## **Video Visits for Juveniles**

In order to set up a video visit you must have a JPAY account. Visit [JPAY.com](http://JPAY.com) to set one up.

The website does charge a fee of \$9.95 for a video visit however JPAY has agreed to waive that fee for Juveniles. In order to get the fee waived you must:

Contact JPAY help desk at **(855) 445-5729**, Nina Valera or Lesmy Palomino are the contacts. JPAY will put credits on the family member's account (up to 10 at a time) so that when setting up a video visit online the credit will offset the \$9.95 fee.

To: Whom it May Concern:  
From: Aashia M. Bade, Psy.D., HSPP

Should your son/dependent currently participate in mental health services or do so in the future, our Psych Clinic is held every Thursday morning. Students meet with mental health professionals monthly or more frequently for counseling and/or medication management, depending on the student's mental health needs. We encourage you to come and meet with the assigned mental health professionals to provide input or share concerns regarding your son's/dependent's treatment. If you are unable to come and meet with the assigned mental health professionals, we encourage you to contact them by phone with any questions and/or concerns.

Please complete the enclosed Developmental History form and return to the mental health department. The student's developmental history is important for the mental health staff to make an informed decision regarding the necessary type of services, such as counseling and/or medications.

If applicable, please find another enclosed form related to the student's psychiatric medications. This allows you to voice any comments or concerns related to his psychiatric care, have them reviewed by the facility Superintendent, and addressed by the psychiatrist, even if you are unable to attend the Psych Clinic.

Please feel free to contact me with future questions or concerns.

Sincerely,

Aashia M. Bade, Psy.D., HSPP  
Lead Psychologist  
(765) 778-3778 ext. 2609

Ti'auna Guthrie, MA, CSAYC  
Mental Health Professional  
(765) 778-3778 ext. 2610

Rhonda Shotwell, MSW, LSW  
Mental Health Professional  
(765) 778-3778 ext. 2706

Robin Morford, LCSW  
Mental Health Professional  
(765) 778-3778 ext. 2607

Dr. Daniel Rippetoe, MD  
Psychiatrist  
(765) 778-3778 ext. 2606



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Governor

**PENDLETON JUVENILE CORRECTIONAL FACILITY**  
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**Bruce Lemmon**  
Commissioner

## **Student Mail**

While at Pendleton Juvenile your student can receive mail through the United States Postal Service.

### **Things you need to know to ensure your student receives his mail:**

1. The mail is screened prior to entering the facility.
2. The sender must have their first and last name and complete address on the return section of the envelope.
3. Only the person listed on the envelope may have letters in that envelope. Each new sender will need their own envelope.
4. Students cannot send/receive mail from anyone in a correctional facility, jail, detention center, on probation, parole, or work release without prior approval from the Superintendent.
5. Mail needing additional postage will not be accepted at the facility.
6. Mail cannot contain any illegal activities including gang related activity or symbols.
7. Books and magazines must be mailed directly from the publisher, the distributor or an accredited institution of higher learning. No hard back books are allowed and all will be subject to review for appropriateness in a correctional facility.
8. Letters are not to be written in code.
9. Photographs are allowed to be mailed in with some restrictions. Students are only allowed to have a certain number of photos at any given time. Photos containing nudity, weapons, alcohol/drugs, money, gang symbols, illegal activities, and/or victims are not permitted.
10. Stickers are not allowed on mail.
11. No oversized, musical, or light up cards.
12. Stationary items cannot be sent in. Students can purchase and earn extra stationary items.
13. No glitter, confetti, or other items may be sent in.
14. Students name and DOC# need to be on the envelope.

To write to your student our mailing address is:

**9310 South State Road 67  
Pendleton IN, 46064**



**Michael R. Pence**  
Governor

**PENDLETON JUVENILE CORRECTIONAL FACILITY**  
9310 South State Road 67 • Pendleton, Indiana 46064-8536  
Phone: (765) 778-3778 • Fax: (765) 778-5211

**Bruce Lemmon**  
Commissioner

## **Parents/Guardians Bill of Rights**

The Division of Youth Services is dedicated to protecting, caring for and improving the lives of youth and the families of those children committed to the Department of Correction. We are committed to promoting an atmosphere of trust and compassion which improves the quality of life, conditions of confinement and reintegration and aftercare services which improve long-term outcomes for youth and their families. We are dedicated to increased family engagement initiatives which promote your parental rights and continued engagement with your child during their commitment to the Department of Correction, Division of Youth Services.”

**1. As a parent/guardian, you have the right to know that you and your child will be treated fairly regardless of race, religion, national origin, language, economic status, disability, gender, sexual orientation, or age and that each child will be treated as an individual.**

*You and your child will be treated fairly by DYS staff, without regard to your age, gender, religion, sexual orientation, the color of your skin, the language you speak, the amount of money you have, the country you come from, or disabilities you may have. You and your child should always be treated with professionalism, respect, and dignity.*

**2. As a parent/guardian, you have the right to expect DYS to provide a safe, secure, and sanitary environment for your child.**

*As a parent/guardian, you have a right to expect that the environment your child is in will be safe, secure, and clean.*

**3. As a parent/guardian, you have the right not to be judged, blamed or labeled because of your child’s incarceration.**

*We recognize that there are many factors that contribute to a child being committed to DYS. Your child’s incarceration is not an indicator of your worth as a parent. DYS staff will not judge you because your child has been committed to DYS.*

**4. As a parent/guardian you have the right to be a vocal and active advocate on behalf of your child.**

*It is more important than ever before to be a vocal and active advocate on behalf of your child. Some ways to be involved are:*

- The right to prohibit identifiable pictures or videos of your child from being disseminated for public use without your permission.
- The right to direct the religious training of your child.
- The right to file a complaint with the expectation that it will be tracked, investigated, and resolved in a timely manner in accordance with law, policies, or administrative directives.
- The right to access any policy or directive upon request unless it is confidential in nature.
- The right to express your concern and have it taken seriously without the threat or fear of retaliation against you or your child.

**5. As a parent/guardian, you have the right to be an active participant when decisions are made about your child.**

*As a parent/guardian, you also still have the right to actively participate when decisions are made about your child. This may include:*

- Participate in person or via telephone on any and all treatment teams.
- Participate in person or via telephone on any educational conference.
- Participate in person or via telephone for mental health/medical conferences
- Attend family sessions to review student's progress in program

**6. As a parent/guardian, you have the right to be informed about matters related to your child's welfare.**

*Parents/guardians need information about their children. That need is especially critical when your child is away from you for long periods of time. While your son or daughter is in DYS, you have the right to be informed about different aspects of his or her welfare. Some of these rights include:*

- The right to timely notification of your child's behavior, including any consequences for rule violations.
- The right to timely notifications of special events at your child's facility, including graduations or other activities.
- The right to be provided contact information for the Office of the Ombudsman.
- The right to timely notification if your child is assaulted injured, hospitalized, transferred to another facility, or escapes.
- The right to be informed of your child's progress in treatment, including medical, psychological, psychiatric, and educational progress.
- The right to be informed of serious or persistent medical conditions related to your child.

**7. As a parent/guardian, you have the right to communicate with your child, including visitation, telephone, and mail.**

*Continued communication with your child is essential. You have the right to visit your child, talk to him or her on the telephone, and to send and receive letters from your child within guideline. Specifically, those rights include:*

- The right to a timely visit with your child after properly arriving at the receiving facility.
- The right to have your child's mail and telephone calls handled in a respectful, timely fashion.
- The right to face-to-face contact visits with your child.
- The right to be informed, in a timely manner, of current policies and procedures that affect visiting with your child
- The right to have special visitation requests accommodated if approved by the facility, may included long-distance travel requirements, parent work schedules that preclude visiting during normal hours, or bereavement.
- The right to have accurate information about current visitation rules.

**8. As a parent/guardian, you have the right to be assured that all DYS staff are professional, courteous, and respectful.**

*You have the right to expect that DYS staff will treat you and your child in a professional, courteous, and respectful manner. DYS staff will be professionals in their field. You have the right to know that they have been properly trained and credentialed for their job responsibilities. Furthermore, you should expect DYS staff to keep accurate records, from the time of your child's intake to his or her eventual discharge.*

**9. As a parent/guardian, you have the right to meaningful participation in your child's transition planning – from intake through community reentry and eventual discharge.**

*As a parent/guardian, you have the right to participate in the release planning, beginning at your child's initial commitment to DYS and continuing through the Community Supervision process all the way to his or her eventual discharge. Your rights include:*

- The right to know that effective transition planning for your child, including early identification of youth and family needs and referral to appropriate services and resources, begins at intake and continues through reentry until discharge.
- The right to be informed of the services, support, and resources available to you and your child in your home community, including possible medical coverage and other government benefits.
- The right to be informed of your rights and responsibilities while your child is on community supervision.